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PTO/SB/36 (04-05)

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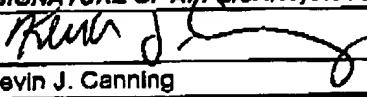
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<p><b>Request For Continued Examination (RCE) Transmittal</b></p> <p>Address to: MS RCE Commissioner for Patents P.O. Box 1460 Alexandria, VA 22313-1450</p>	<p>Application Number 09/651832-Conf. #3937</p> <p>Filing Date May 9, 2001</p> <p>First Named Inventor Julian S. TAYLOR</p> <p>Art Unit 2193</p> <p>Examiner Name A. Khatri</p> <p>Attorney Docket Number SMQ-118RCE/P6144</p>
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This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.  
Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

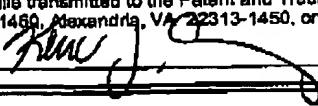
1. **Submission required under 37 CFR 1.114** Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).
  - a.  Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.
    - I.  Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_\_
    - II.  Other \_\_\_\_\_
  - b.  Enclosed
    - i.  Amendment/Reply
    - ii.  Affidavit(s)/Declaration(s)
    - III.  Information Disclosure Statement (IDS)
    - IV.  Other \_\_\_\_\_
2. **Miscellaneous**
  - a.  Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of \_\_\_\_\_ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(l) required)
  - b.  Other \_\_\_\_\_
3. **Fees** The RCE fee under 37 CFR 1.17(a) is required by 37 CFR 1.114 when the RCE is filed.
  - a.  The Director is hereby authorized to charge the following fees, any underpayment of fees, or credit any overpayments to Deposit Account No. 12-0080. I have enclosed a duplicate copy of this sheet.
    - I.  RCE fee required under 37 CFR 1.17(a)
    - II.  Extension of time fee (37 CFR 1.136 and 1.17)
    - III.  Other \_\_\_\_\_
  - b.  Check in the amount of \$ \_\_\_\_\_ enclosed
  - c.  Payment by credit card (Form PTO-2038 enclosed)

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED**

Signature		Date	September 8, 2005
Name (Print/Type)	Kevin J. Canning	Registration No.	35,470

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (571) 273-8300 at MS RCE, Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1450, on the date shown below.

Dated: September 8, 2005

Signature: 

(Kevin J. Canning)

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PAGE 3/22 \* RCVD AT 9/8/2005 4:50:41 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-6/31 \* DNIS:2738300 \* CSID:6177424214 \* DURATION (mm:ss):05:22

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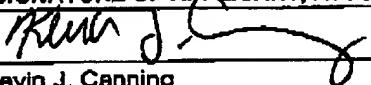
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		<b>Filing Date</b>	May 9, 2001
		<b>First Named Inventor</b>	Julian S. TAYLOR
		<b>Art Unit</b>	2193
		<b>Examiner Name</b>	A. Khatri
		<b>Attorney Docket Number</b>	SMQ-118RCE/P6144

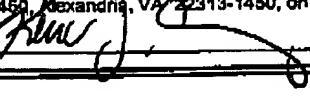
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<p><b>2. Miscellaneous</b></p> <p>a. <input type="checkbox"/> Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(l) required)</p> <p>b. <input type="checkbox"/> Other _____</p>			
<p><b>3. Fees</b> The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.</p> <p>a. <input checked="" type="checkbox"/> The Director is hereby authorized to charge the following fees, any underpayment of fees, or credit any overpayments to Deposit Account No. <u>12-0080</u>. I have enclosed a duplicate copy of this sheet.</p> <p>i. <input checked="" type="checkbox"/> RCE fee required under 37 CFR 1.17(e)</p> <p>ii. <input checked="" type="checkbox"/> Extension of time fee (37 CFR 1.138 and 1.17)</p> <p>iii. <input type="checkbox"/> Other _____</p> <p>b. <input type="checkbox"/> Check in the amount of \$ _____ enclosed</p> <p>c. <input type="checkbox"/> Payment by credit card (Form PTO-2038 enclosed)</p>			

<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED</b>			
Signature			Date September 8, 2005
Name (Print/Type)	Kevin J. Canning		Registration No. 35,470

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